

→ DR JK November 20, 1978

T&G PROLACTIN FDA-PROPOSED PRECAUTION FOR ANTIPSYCHOTIC DRUGS SUPPORTED by the agency's Psychopharmacologic Drugs Advisory Cmte., in an Nov. 13 vote. The proposed physician label "precaution" had resulted from an earlier cmte. recommendation for epidemiological studies to follow-up animal studies linking use of the drugs to breast cancer, FDAer Thomas Hayes, MD, noted. Pending completion of such studies, which Hayes said is unlikely any time soon, BuDrugs has "decided that as an interim measure, it is important to have wording on the label that would warn of potential problem for human beings from exposure to these drugs." Cmte. member Harold Stevens, MD/PhD, expressed a minority opinion: "In the absence of evidence — I think we ought to say nothing." He referred to the normal anxiety and suspicions of many patients taking antipsychotic drugs and said the prolactin precaution "increases the ambiguity, creating uncertainty with the patient. I don't think that's fair or practical."

¶ Hayes reported that FDA is currently waiting for the results of a comprehensive prolactin study being done by NCI. "If it fails to be conclusive the bureau might well undertake, of its own funding, a study designed to answer the question of effects on humans," FDAer Hayes said, adding: "It's just something we can't do very frequently." Results from the NCI study are not expected for another 12-18 months. "I don't understand the difficulty in designing such experiments," cmte. member Stevens asserted. "The population is readily available in the mental hospitals," suggesting studies be done to see if there was increased breast cancer within that group. "Many of these hospitals have 100% autopsy records."

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T&G GERIATRIC DRAFT RESEARCH GUIDELINES RETURN TO BuDRUGS STAFFERS for reconsideration, following discussion —

stressing "dementia" criteria factor — during FDA's Psychopharmacologic Drugs Advisory Cmte. meeting, Nov. 13-14. "Dementia has been pasted into these (geriatric) guidelines," said cmte. discussant John Overall, PhD, UTex. "I'm concerned about the use of dementia to be the disease with which all other manifestations we may want to treat in elderly people are associated with." He expressed a need to first examine and exclude the more traditionally known causes of mental deterioration in the elderly such as hypoglycemia, cardiovascular problems or toxic conditions. Overall also questioned the test methods used for determining inclusion in a study of "demented" patients. He said there was an overemphasis on the Wexler Adult Intelligence Scale with its "rather outmoded deterioration quotient." Cmte. head Bonnie Camp, MD, PhD, followed up the cmte.'s vote with instructions to the FDA staff "to continue to work on the guidelines and to take the comments brought forward today and incorporate them in any changes."

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T&G PARENTERAL DRUG ASSN. MEMBERS HAVE SUCCESSFULLY ARTICULATED TO FDA their interpretation of excessive specificity contained in planned Good Manufacturing Practice (GMP) regs for large volume parenteral drugs (LVPs), as proposed two years ago, FDA Com. Kennedy advised the group Nov. 16, during its NYC meeting (see related item T&G-7, this issue). FDA is aware of the damage to industry which could result from issuing "ice over" regs establishing procedures which could soon become obsolete, Kennedy said. The LVP GMPs, when finalized, will contain the "desired outcome," but will not be so specific as to preclude the use of different methods to achieve the standard, and guidelines will also be published which will describe current "state-of-the-art" procedures for achieving the outcome — but will be nonbinding, Kennedy continued. For example, Kennedy said, FDA will set out in the substantive LVP GMP document an acceptable "count" re room air sterility and then discuss in guidelines the best known method to achieve that count. "But, if someone comes up with a more cost effective method that is effective, we don't want to prohibit them from using it," he noted.

¶ FDA Associate Director for Compliance Theodore Byers told the PDA audience that the agency is currently "working actively on LVP GMP comments." He explained that FDA action on the LVP GMPs was interrupted because "among other things, the same people who work on the LVPs were given the job of writing the umbrella GMPs. . . We are going to develop a model plan for regulation of parenterals, meaning, at this point-in-time, LVPs." He added that a similar document for small volume parenterals would be developed in the future.

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